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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/797,354	03/10/2004	Stefan Moll	BBMG-100US	4286
23122	7590	01/11/2008	EXAMINER	
RATNERPRESTIA			LE, LINH GIANG	
P O BOX 980			ART UNIT	PAPER NUMBER
VALLEY FORGE, PA 19482-0980			3626	
			MAIL DATE	DELIVERY MODE
			01/11/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/797,354

Applicant(s)

MOLL ET AL.

Examiner

Michelle Linh-Giang Le

Art Unit

3626

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --**Period for Reply**

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 10 March 2004.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-20 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-20 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 10 March 2004 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☒ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☒ All b) ☐ Some * c) ☐ None of:
1. ☒ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|---|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| 3) <input checked="" type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)
Paper No(s)/Mail Date <u>060404</u> . | 6) <input type="checkbox"/> Other: _____ |

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DETAILED ACTION

Notice to Applicant

1. This communication is in response to application filed 10 March 2004. It is noted that application claims priority to foreign application filed 11 March 2003. Claims 1-20 remain pending.

Claim Rejections - 35 USC § 103

2. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

3. Claims 1-20 are rejected under 35 U.S.C. 103(a) as being unpatentable over Hogard (6,284,131) in view of Fujimoto (5,339,821).

4. As per claim 1, Hogard teaches a dialysis station implementing a course of treatment for a patient as instructed by a medical personnel and executed by a person (Hogard; Abstract), the dialysis station comprising:

at least one patient place having a dialyzer (Hogard; Abstract), a video terminal and an ID input device for identifying the medical personnel and at which an acknowledgment of the execution of a treatment instruction is made in that the executing person

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acknowledges his or her identity, the at least one patient place receiving as input information on the execution of the instruction (Hogard; Fig. 8; Col. 8, lines 25-40; Col. 11, lines 40-45);

a central server including a data base (Hogard; Col. 12, lines 8-36).

Hogard does not expressly teach:

at least one physician place equipped with a video terminal,
said video terminals of the at least one patient place and the at least one physician place and the server being interlinked with each other and configured such that information on the course of the treatment at a selected patient place is callable and instructions for a selected patient place are adapted to be input.

However this is well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches a home medical system, including a pump equipped with communication equipment to connect to a medical institution side (Fujimoto; Col. 3, lines 35-55; Col. 7, lines 55 to Col. 8, line 8). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

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5. As per claim 2, Hogard does not expressly teach information on occurrences can be input at the patient place, and an acknowledgment of the input is effected in that the executing person acknowledges his or her identity in the ID input device. However, this is well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches inputting identification information into the medical apparatus (Fujimoto; Col. 7, lines 55-65). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

6. As per claim 3, Hogard does not expressly teach wherein a patient code can be input which allocates the patient place to a patient. However, this is well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches inputting identification information into the medical apparatus (Fujimoto; Col. 7, lines 55-65). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

7. As per claim 4, Hogard teaches wherein the video terminal of the patient place is configured as a user interface for setting and changing parameters of the dialyzer (Hogard; Col. 8, line 60 to Col. 9, line 10). Hogard does not expressly teach the setting and change are stored along with the identity of the executing person. However, this is

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well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches inputting identification information into the medical apparatus (Fujimoto; Col. 7, lines 55-65). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

8. As per claims 5 and 6, Hogard does not expressly teach:

wherein the video terminals of the at least one patient places and the physician place are connected in an internal communication network;

wherein the internal communication network is connected with an external communication network to which a video terminal of an external physician place is connected.

However, this is well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches a home medical system including a medical institution side communication apparatus or link and a telecommunication line (Fujimoto; Col. 2, line 40-50). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

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9. As per claim 7, Hogard does not expressly teach wherein a symbol for calling an instruction input at the physician place can be illustrated on the video terminal of the at least one patient place. However, this is well known in the art as evidenced by Fujimoto. In particular, Fujimoto teaches a home medical system including a medical institution side communication apparatus or link and a telecommunication line (Fujimoto; Col. 2, line 40-50). It would have been obvious to add these features to Hogard with the motivation of having a home medical system that can undergo a check or inquiry a medical specialist at a medical institution (Fujimoto; Col. 1, line 65 to Col. 2, line 5).

10. As per claim 8, Hogard teaches wherein a patient data file stored in the server includes indications on the dialyzer determined for a patient as well as on the settings and operational parameters thereof, and the video terminal of the at least one patient place receives the settings and operational parameters from the server and sets them at the dialyzer (Hogard; Col. 11, lines 14-45; Col. 12, lines 8-64).

11. As per claim 9, Hogard teaches wherein the input device consists of a data reader reading information on the patient the operator, or both from a data carrier (Hogard; Col. 11, lines 14-45; Col. 12, lines 8-64).

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12. As per claim 10, Hogard teaches wherein each video terminal comprises a screen with a keyboard and a computer connected with a control portion of the dialyzer (Hogard; Col. 11, lines 14-45; Col. 12, lines 8-64).

13. Claims 11-20 repeat limitations recited in claims 1-10 and the reasons for rejection are incorporated herein.

Conclusion

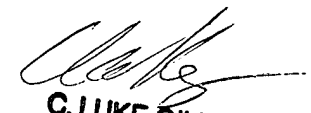
14. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Michelle Linh-Giang Le whose telephone number is 571-272-8207. The examiner can normally be reached on 8 AM - 5PM, M-F.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 571-272-3600. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.


LLe
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